

MANSFIELD & REGION 19 SCHOOL LUNCH PROGRAM

APPLICATION FOR FREE OR REDUCED PRICE MEALS or FREE KINDERGARTEN MILK (1/2 Day Kindergarten Students Only)

September 2011

Dear Mansfield Public School Families:

The Mansfield Public Schools and Region #19 participate in the National School Lunch/School Breakfast Program. Meals are served daily as planned. Students may buy lunch for \$2.10 at the Elementary Schools, \$2.35 at the Middle School and \$2.65 at the High School. Breakfast is available K-12 at a cost of \$1.30 at the Elementary Schools, \$1.55 at the Middle School and \$1.80 at the High School. Kindergarten milk for ½ day students is 40 cents. All meals are available free or at a reduced price for those that qualify.

- If you now get Supplemental Nutrition Assistance Program (SNAP) (formerly the Food Stamp Program) or Temporary Family Assistance (TFA) for your child, that child can get free meals.
- If your total household income is at or below the amounts on the Income Chart, your child can get free meals or reduced price meals for 40 cents for lunch and/or 30 cents for breakfast.
- If you have a foster child, that child may be eligible for benefits regardless of your income because the child is a legal ward of the State of Connecticut and is categorically eligible. However, subsidized adoptions and subsidized guardianships require the calculation of all household income plus the adoption/guardianship subsidy.
- Children in households participating in WIC may be eligible for free or reduced price meals.
- You or your child(ren) do not have to be a U.S. citizen to qualify for free or reduced price meals.

HOW TO APPLY:

To get free or reduced price meals for your child or children, carefully complete the application and return it to the school or bring in a letter from the Department of Social Services.

A. SNAP or TFA Applicants (formerly known as the Food Stamp Program): **If you now get SNAP or TFA for your child(ren), the application must have the child(ren)'s name(s), the Client ID/Case number for each child and the signature of an adult household member.**

OR

B. Household has income: **The application must contain the following:**

- the names of everyone in the household
- the amount of income each household member received last month, where it comes from and how often it is received
- the signature of an adult household member and the last 4 digits of the adult's social security number or the word "none" if the adult does not have a social security number.

C. Foster Child: **Households with a foster child must include the child's name, the amount of personal use income the child received last month and an adult must sign the**

D. Military Housing:

If your housing is part of the Military Housing Privatization Initiative, do **not** include your housing allowance as income. All other allowances must be included in your gross income.

application. A separate application is no longer required for a foster child.

INCOME CHART:

Effective from July 1, 2011 to June 30, 2012

Number in Family	Annual Gross Income	Monthly Gross Income	Every 2 Weeks Gross Income	Weekly Gross Income
1	20,147	1,679	775	388
2	27,214	2,268	1,047	524
3	34,281	2,857	1,319	660
4	41,348	3,446	1,591	796
5	48,415	4,035	1,863	932
6	55,482	4,624	2,134	1,067
7	62,549	5,213	2,406	1,203
8	69,616	5,802	2,678	1,339
Each Add'l Family Member	+ 7,067	+ 589	+ 272	+ 136



NOTE: An application that is not complete cannot be approved.

